



Trenee Parker, MA, DFS Director

Prepared with Jennifer Donahue, Esq., IC/OCA

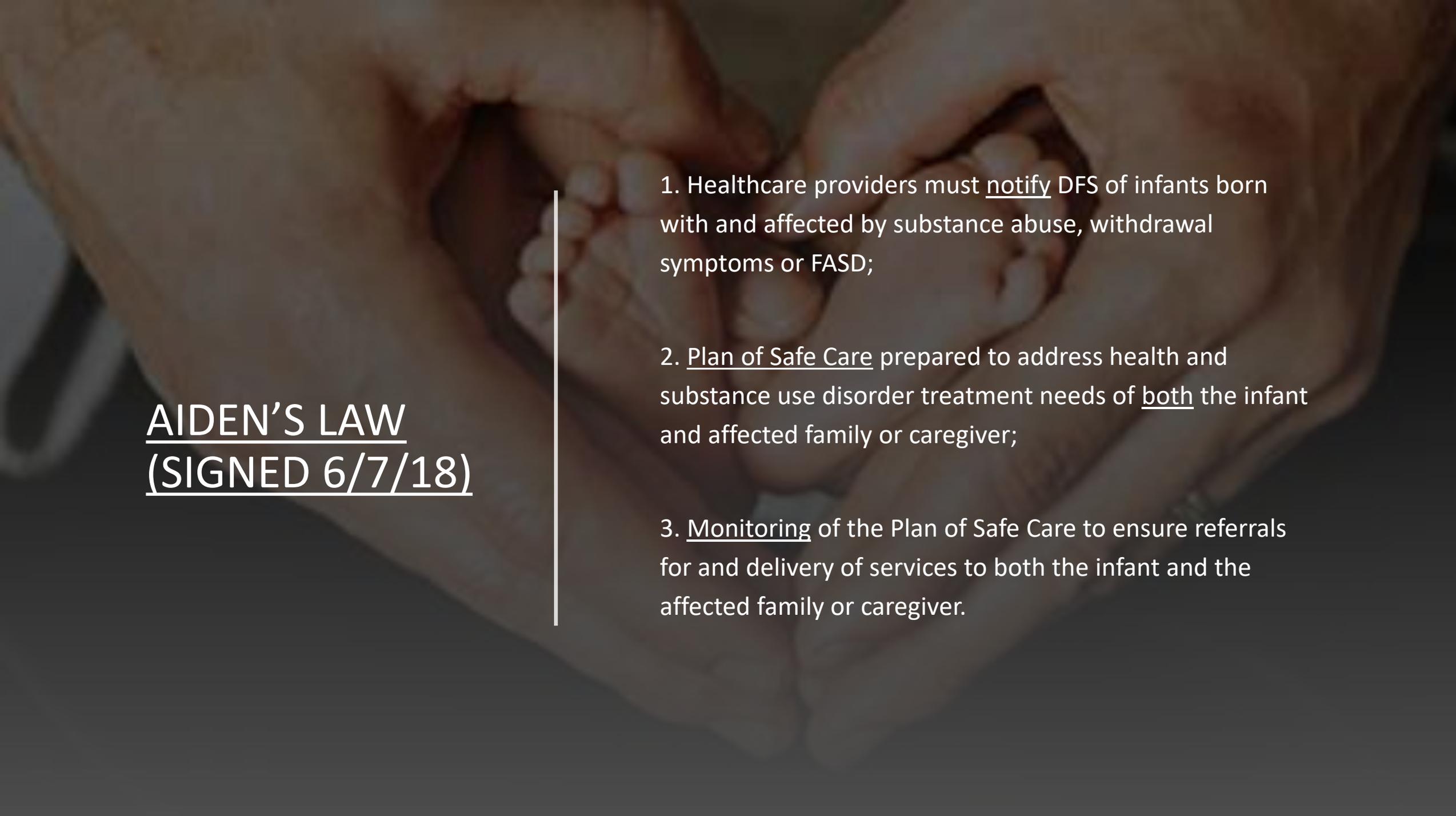
**PLANS OF SAFE CARE:
HOW TO MEET MOM
AND BABY'S NEEDS**

POLLING QUESTION

- I am familiar with the Plan of Safe Care.
- Yes, I've heard of the plan.
- Yes, I've worked with a person who had a plan.
- I have no idea what a Plan of Safe Care is.

POLLING QUESTION

- Does Delaware have legislation that requires the completion of the Plan of Safe Care?
 - Yes
 - No
 - I'm not sure



AIDEN'S LAW
(SIGNED 6/7/18)

1. Healthcare providers must notify DFS of infants born with and affected by substance abuse, withdrawal symptoms or FASD;
2. Plan of Safe Care prepared to address health and substance use disorder treatment needs of both the infant and affected family or caregiver;
3. Monitoring of the Plan of Safe Care to ensure referrals for and delivery of services to both the infant and the affected family or caregiver.

SUBSTANCE EXPOSURE DEFINED BY AIDEN'S LAW

1. Mother or infant test positive test at the time of birth for a “substance” (alcohol, illicit drugs or misuse of legal/prescription/MAT drugs); or
2. Mother had a positive test for a substance at any time during the 60 days prior to the birth (in prenatal records); or
3. Mother reports/discloses substance use during the 60 days prior to the birth; or,
4. Negative test at the time of birth but infant is experiencing withdrawal symptoms or Neonatal Abstinence Syndrome at the birth event.

POLLING QUESTION

- I am working with a person who became pregnant while receiving MAT. Do I have to notify DFS about the pregnancy?
- Yes
- No
- I don't know

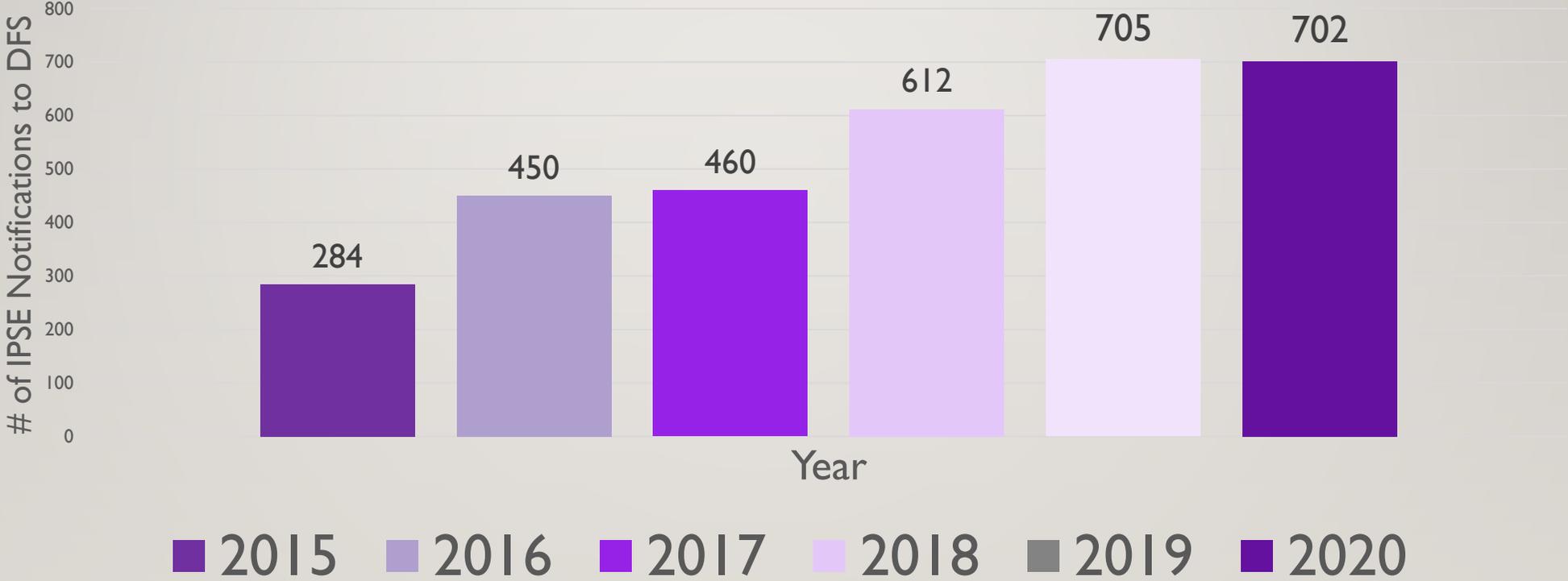
POSC PATHWAYS

Type of Substance Exposure/ Risk Factors	Notification to DFS at birth event? (yes/no)	POSC Coordinator
Alcohol or Illicit Drugs (other than marijuana)	Yes	Division of Family Services
Misuse of legal/prescription drug	Yes	Division of Family Services
Any substance with high risk factors	Yes	Division of Family Services
Marijuana and no other risk factors	Yes	Contract Agency (ie. Holcomb)
Medication Assisted Treatment (ie. methadone, Subutex, suboxone) and no other risk factors	No (quarterly data exchange with DFS)	MAT provider
Legal prescription that can cause withdrawal symptoms in infant, no other risk factors and no diagnosis of substance use disorder	No (quarterly data exchange with DFS)	Hospital (“Medical POSC”)

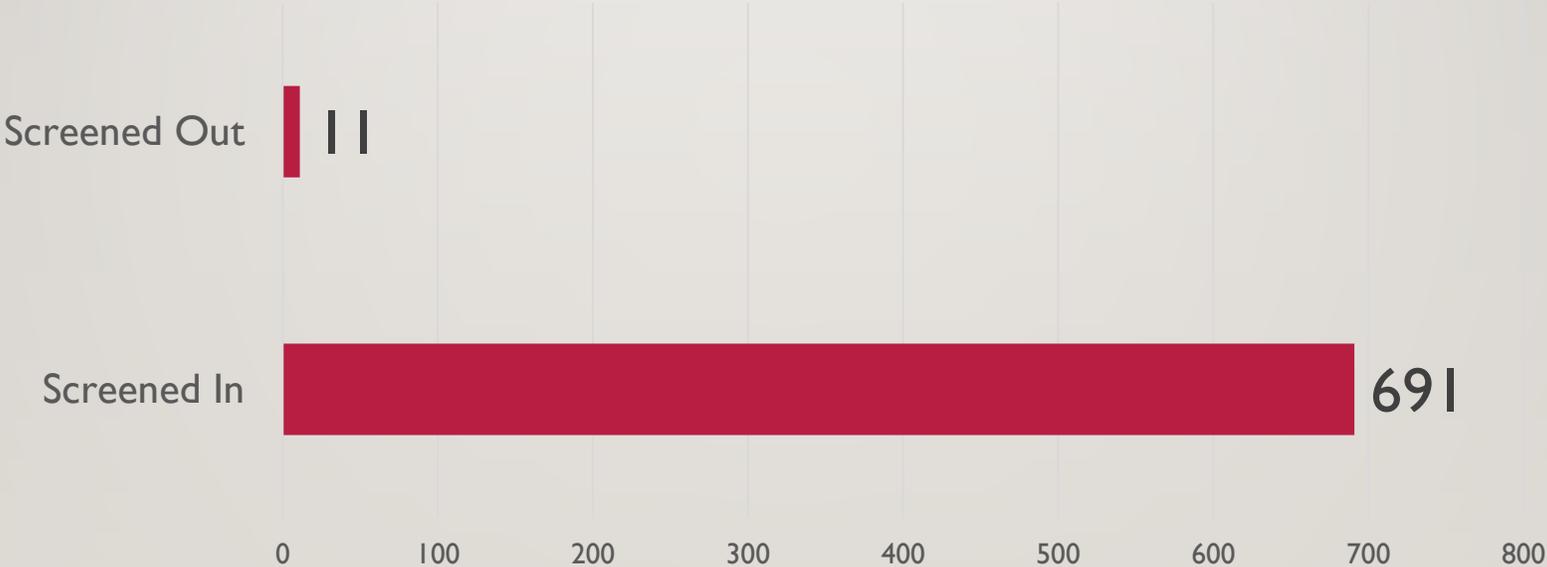
POSC VS. CHILD SAFETY AGREEMENT: COMPARISON

POSC	Child Safety Agreement
Is required for all infants born and identified as being affected by substance abuse or withdrawal	Is required when a safety threat is identified per the SDM® Policy and Procedure Manual
Focuses on risk, needs, and supportive services	Focuses on the immediate safety threats (worries), the protective capacities (working well), and the intervention (what needs to happen next)
The family may refuse to sign the POSC	If a safety threat is identified, the family and other participants must sign the Agreement
Is shared among the identified providers and the family	Is only shared with the parent/caregiver and the participants of the Agreement
Includes the process of referrals and service delivery	Includes behaviorally specific language as to the actions that will keep a child safe

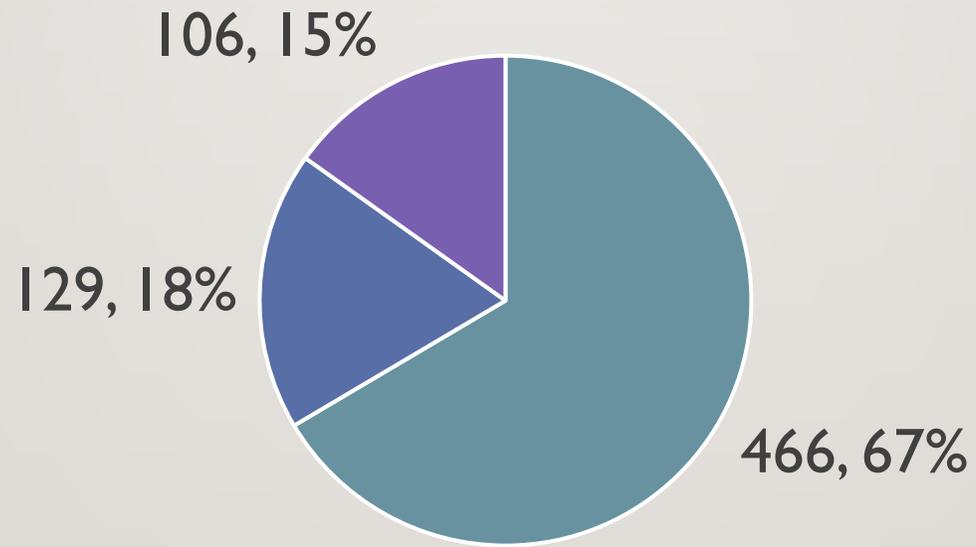
6 YEAR COMPARISON OF NOTIFICATIONS TO DFS (*INCLUDES CASES THAT REQUIRE A DFS NOTIFICATION AT THE BIRTH EVENT)



SCREENED IN VS. OUT BY DFS (N:702)

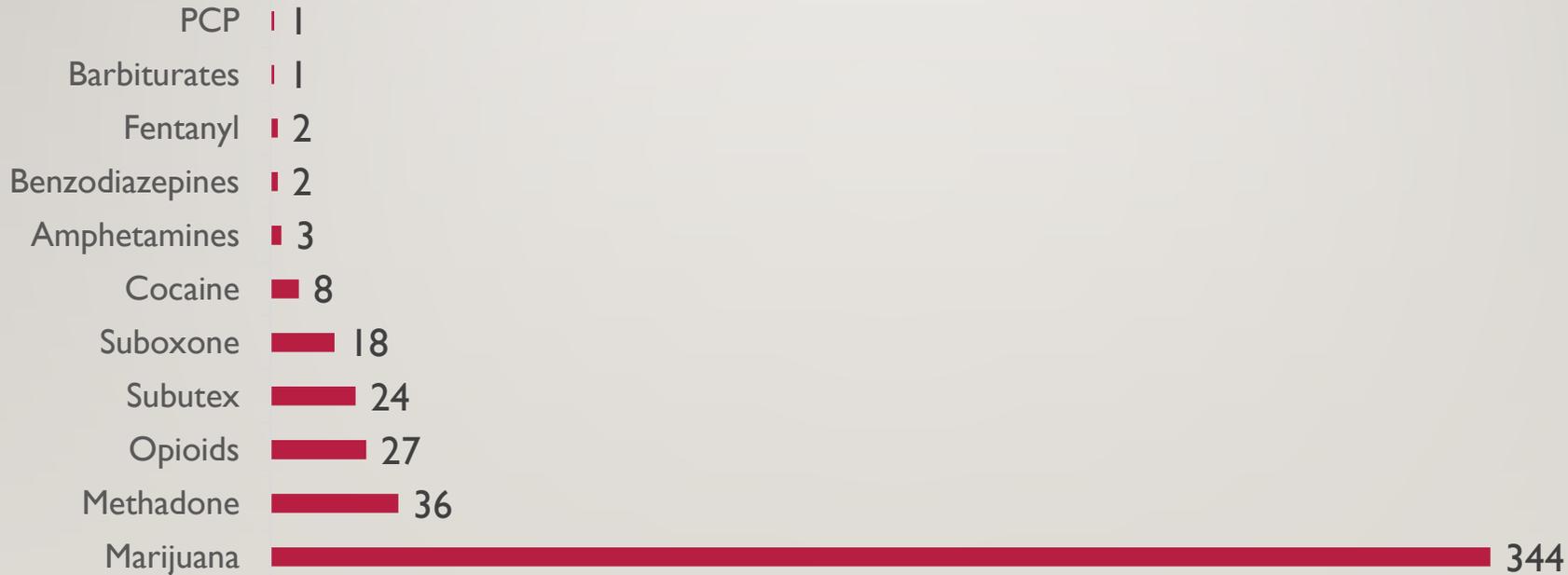


EXTENT OF SUBSTANCE EXPOSURE

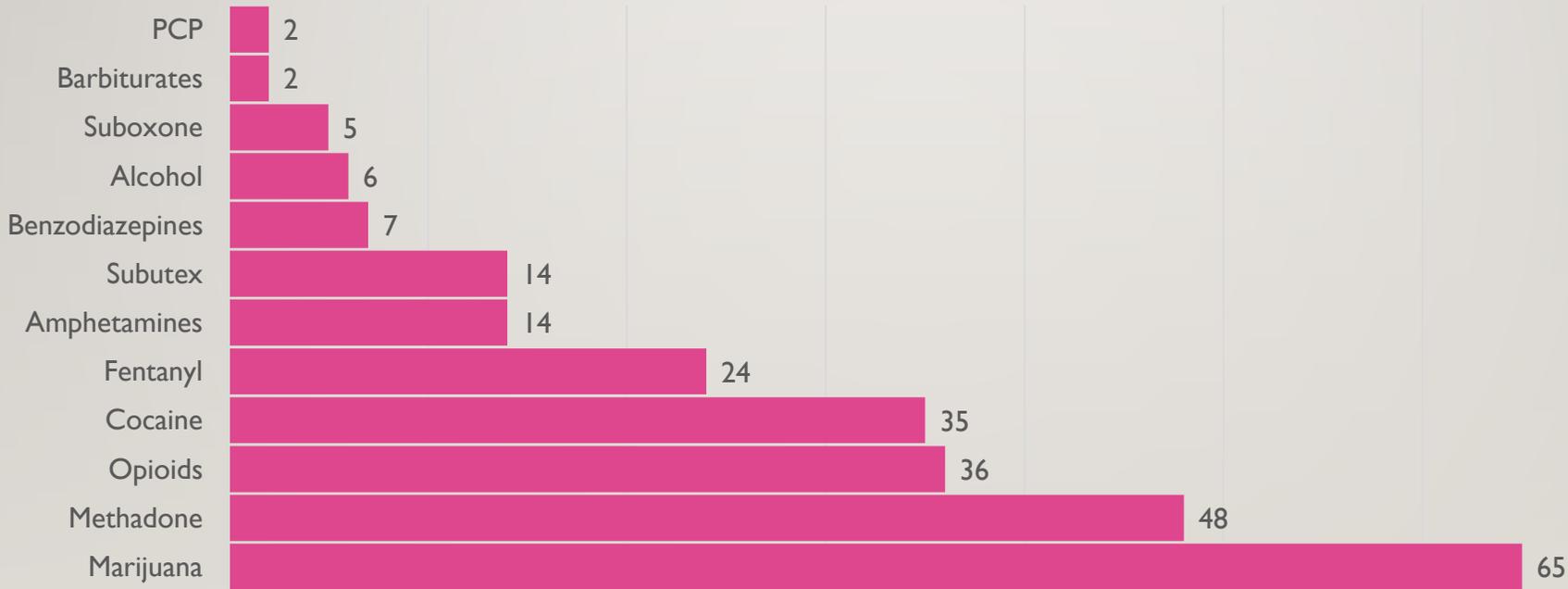


■ 1 Substance ■ 2 Substances ■ 3 or More

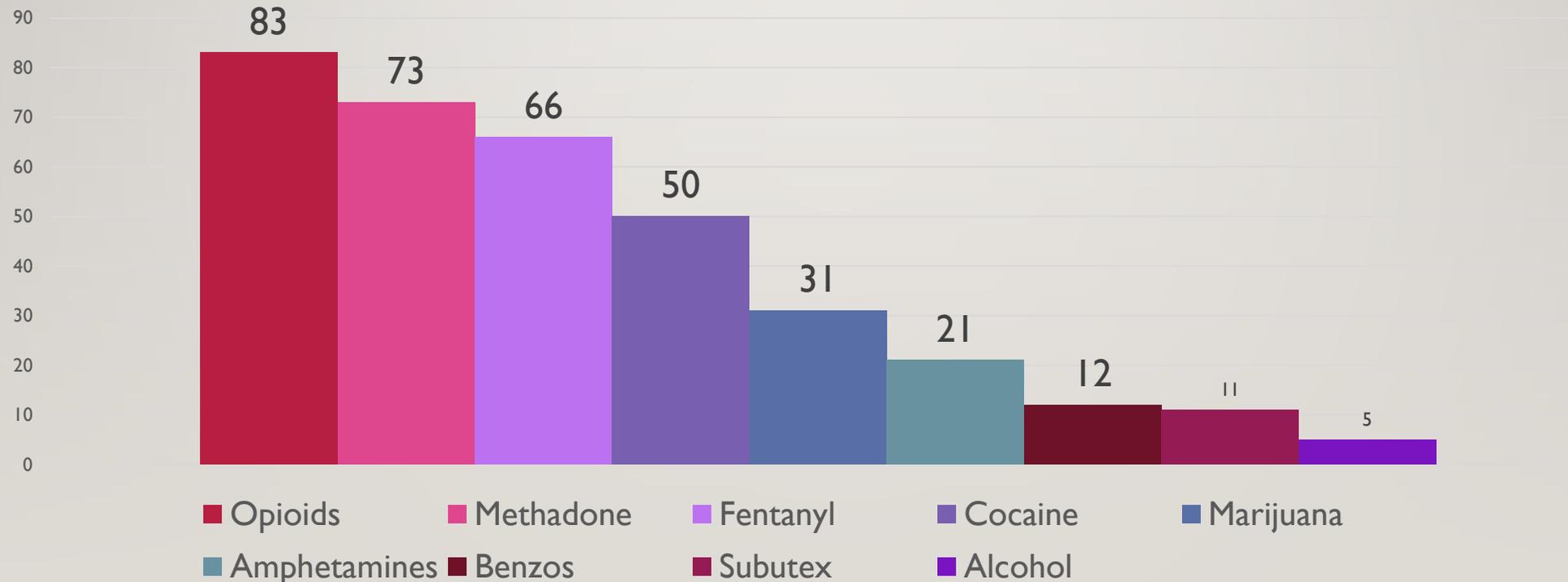
MOST PREVALENT SUBSTANCES IN SINGLE SUBSTANCE EXPOSURE (N: 466)



MOST PREVALENT SUBSTANCE IN TWO SUBSTANCE EXPOSURE (N: 129)



MOST PREVALENT SUBSTANCES IN POLY (3 OR MORE) SUBSTANCE EXPOSURE (N: 106)

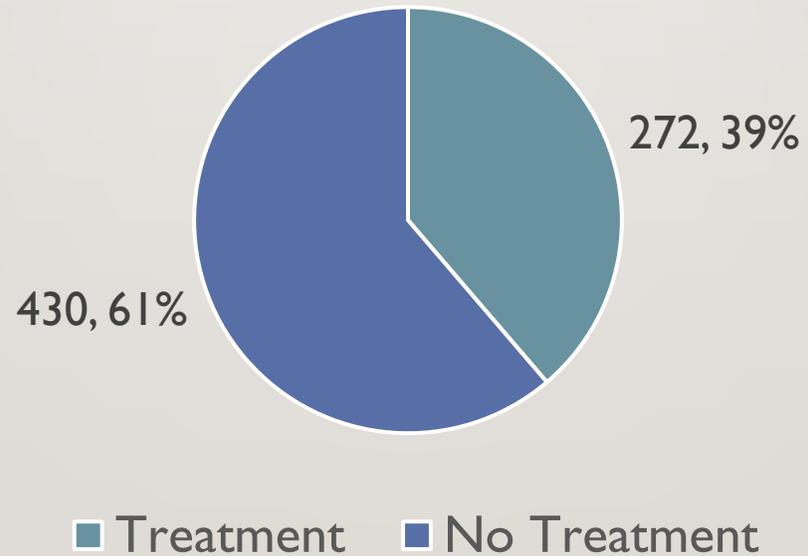


MATERNAL RISK INDICATORS (N: 702)

MATERNAL RISK INDICATORS	PERCENTAGE (N: 702)
DFS History/Trauma as a Child	40% (284 of 702)
Mental Health Condition	56% (392 of 702)
Prior IPSE Birth	24% (170 of 702)
Engaged in SUD/MAT/MH Treatment (at time of birth)	38% (272 of 702)
Unnamed/Unknown Father/Partner	16% (115 of 702)

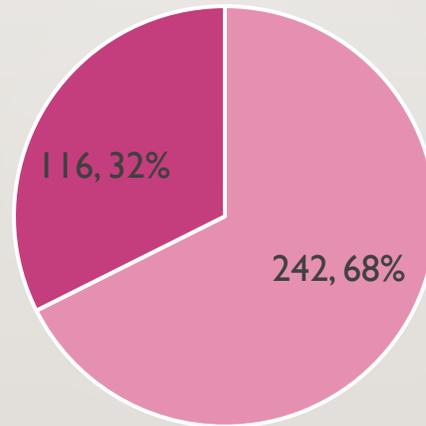
ENGAGED IN TREATMENT SERVICES AT TIME OF BIRTH EVENT

All Mothers/All Substances: 702



ENGAGED IN TREATMENT SERVICES AT TIME OF BIRTH EVENT

Marijuana-Only Cases Excluded: 358

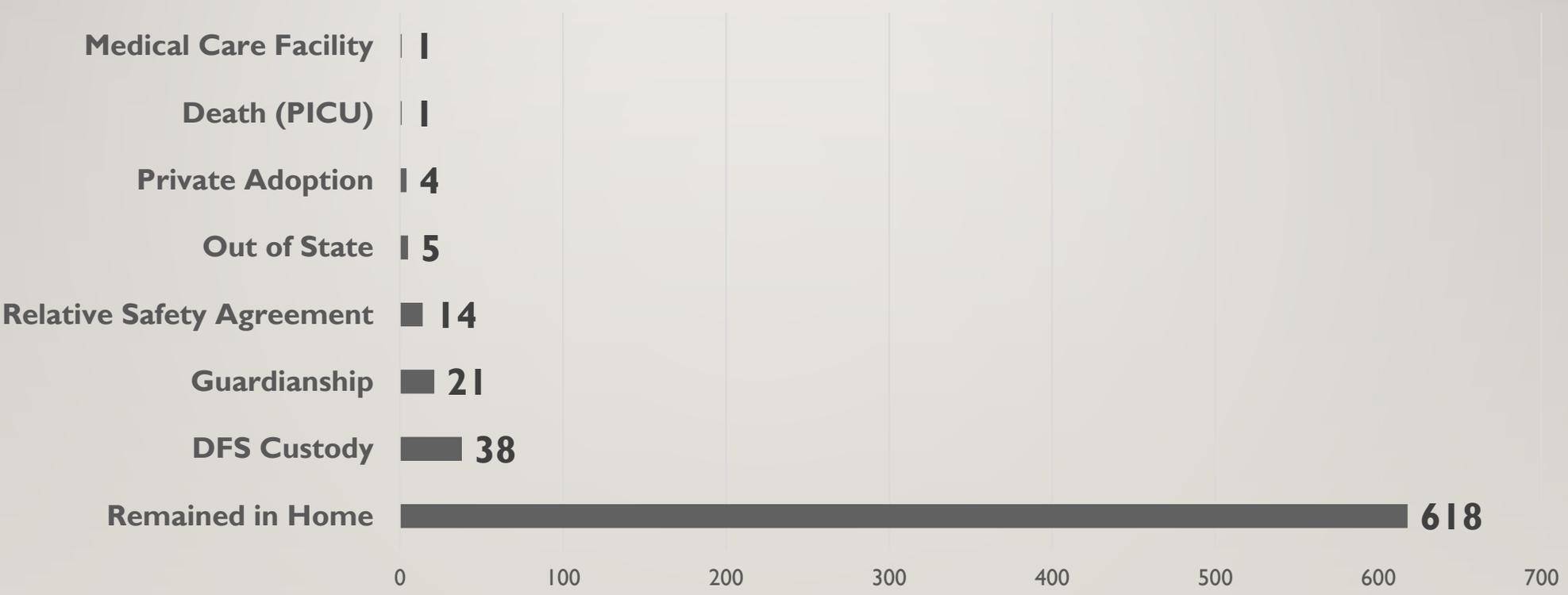


■ Treatment ■ No Treatment

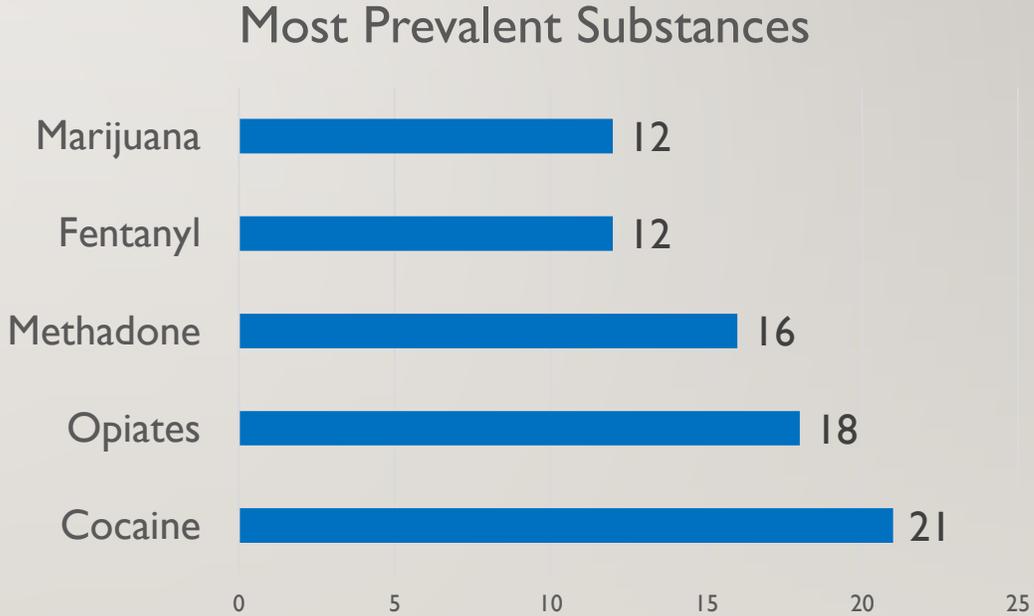
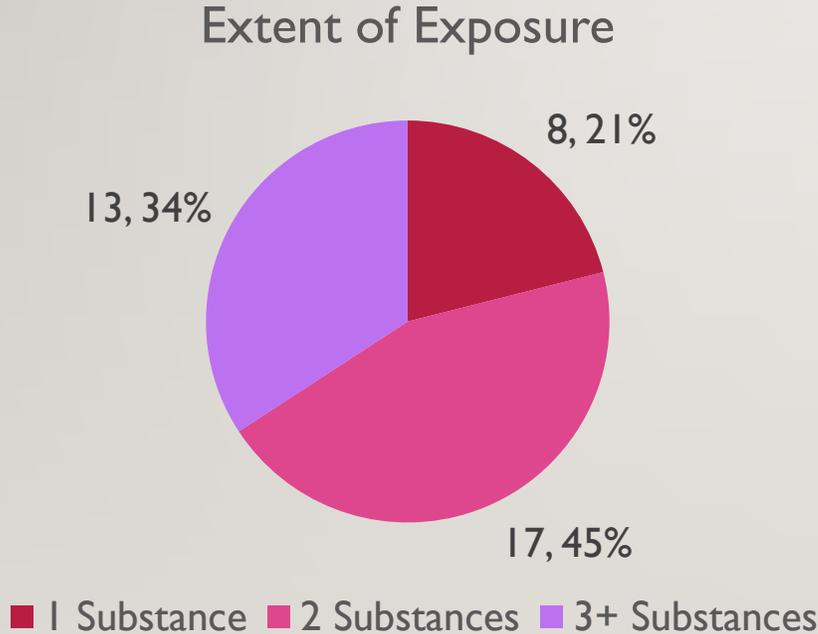
POLLING QUESTION

- A newborn who is prenatally exposed to substances will be removed from the care of their parents and placed in foster care?
- Yes
- No
- I don't know

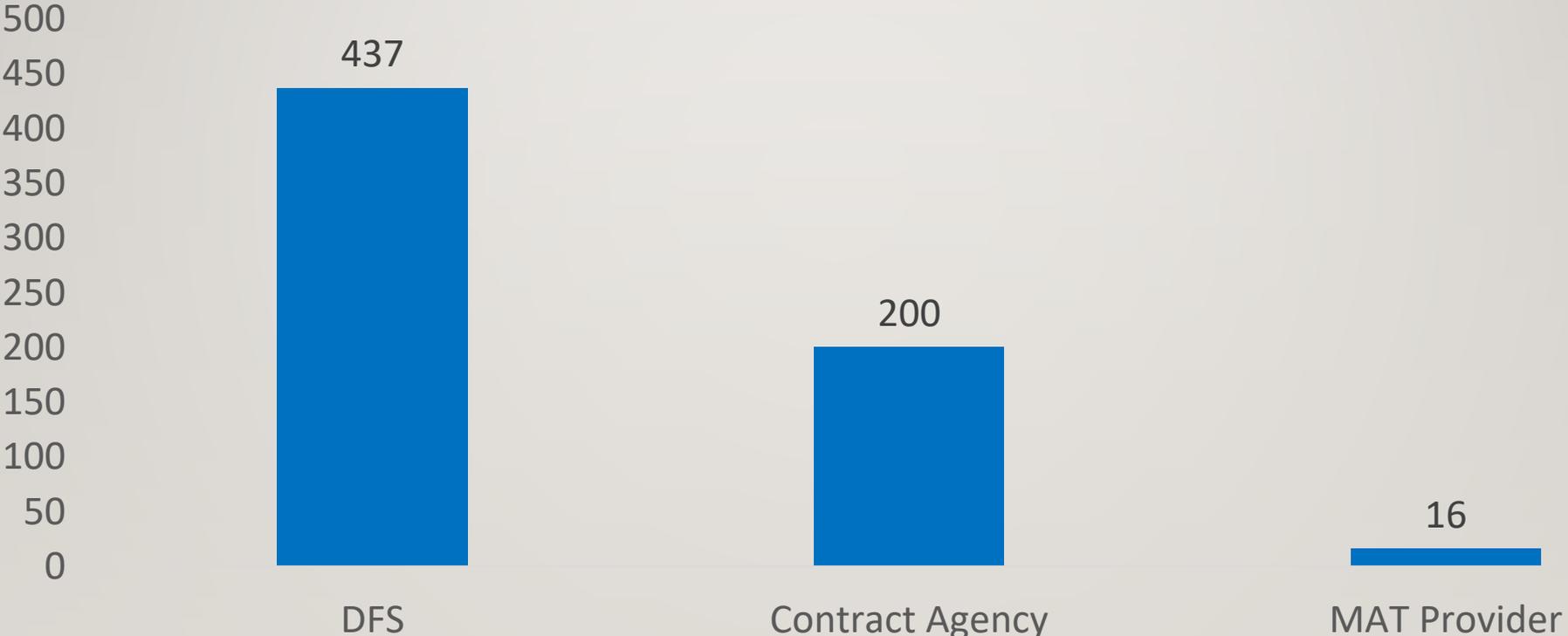
PLACEMENT REMAIN IN HOME VS. OUT OF HOME (702 CASES)



SNAPSHOT OF DFS CUSTODY CASES (N:38)



PLANS OF SAFE CARE PREPARED: 653
(FOR CASES THAT REQUIRED A NOTIFICATION TO DFS AT BIRTH EVENT)



POLLING QUESTION

- Plans of Safe Care are only prepared for moms. True or False?

DFS REFERRALS FOR SERVICES FOR MOTHER

- Plans of Safe Care: 437
- Referrals Made: 288
- No Referrals Made: 149
 - 114 mothers were already engaged in treatment
 - Referrals not indicated for 35 mothers



DFS REFERRALS FOR SERVICES FOR FATHER/OTHER CAREGIVER



- Plans of Safe Care Prepared by DFS: 437
- Father identified as a Plan Participant: 371
- Referrals made: 57
- No Referrals made: 314
 - Fathers already engaged in treatment: 55
 - Referrals not indicated: 259



DFS REFERRALS FOR SERVICES FOR INFANT

- Plans of Safe Care Prepared by DFS: 437
- Pediatrician referrals: 346
- Additional referrals (CDW, HVN, etc.): 194
- Child Safety Agreement with POSC: 189

SIGNIFICANT FINDINGS IN 2020 DATA

- IPSE notifications in 2020 appear to be comparable to 2019 notifications
- 98% of IPSE notifications were screened in by DFS
- 88% of IPSEs remained in home with mother at discharge from hospital
- 38 IPSEs entered DFS custody = 79% were exposed to 2 or more substances, most prevalent substance remains cocaine (since 2018)
- Single substance exposures have increased from 58% in 2017 to 67% in 2020.
- 74% of all single substance exposures were marijuana.
- Marijuana remains the most prevalent drug in two substance exposures as well, followed by methadone, opiates and cocaine.
- In poly-substance exposures (3 or more substances), fentanyl was present in 61%.

SIGNIFICANT FINDINGS 2020 DATA (CONTINUED)

- Fentanyl use increased in 2020 – 72 instances of fentanyl use by white women (50% increase from 2019) and 14 instances of fentanyl use by black women.
- 56% of all women reported a mental health condition.
- 40% of all women had a trauma history or DFS history as a child.

SIGNIFICANT FINDINGS 2020 (CONT'D)

- 68% of women were engaged in treatment services at the time of the infant's birth (marijuana only cases excluded) = 242 women
 - 172- medication assisted treatment (MAT)
 - 46- substance use disorder treatment (SUD)
 - 43- mental health treatment (MH)
 - 7- pain management

SIGNIFICANT FINDINGS 2020 (CONT'D)

- 3 Serious Injuries and 2 unsafe sleeping deaths = 3 of 5 cases involved fentanyl exposure
- 653 Plans of Safe Care were prepared
 - 437 by DFS
 - 200 by Contract Agency (Holcomb)
 - 16 by MAT provider (Connections or Brandywine)

OPPORTUNITIES FOR THE FUTURE

- Need to increase the number of MAT providers who can complete prenatal Plans of Safe Care
- Other suggestions?

THANK YOU!!!

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